## STATE OF NORTH CAROLINA DIVISION OF SOCIAL SERVICES **CONTRACT BUDGET SUMMARY Effective Period** Contract Contractor ID# From To\_ Part I – Revenues **Program Costs** % of Source of Amount Funds Funds **Maximum Federal Funds** 56,678 **25% SSBG** 1. **IV-B-1** 226,708 <u>75 %</u> % 2. Maximum State Funds 0 3. \$ Contractor Match Funds - Cash % 4. **Contractor Match Funds - In-Kind** 79,813 % 5. State Match Funds - Cash % **TOTAL PROGRAM COST** 363,199 6. \*Total of #1 and #2 should equal Part II, Column 2. \*Total of #3 and #4 should equal Part II, Column 1. \*Line 6 should equal Part II, Column 3. **Part II - Estimated Expenditures** Column 1 Column 2 Column 3 **Contractor Funds** Federal/State **Total Object of Expenditure** (Cash and/or In-**Program Funds** Kind) **Costs** A. Salaries 49,417 62,075 111,492 В. Fringe Benefits 7,021 5,259 12,80 C. Staff Development-0 4,365 4,365 D. Travel 15,001 15,001 0 E. 2,125 6,125 **Equipment Purchases-Tangible Property** 4,000 F. 0 Transportation-Recipient 0 0 G. Medical Supplies and Expense 0 0 0 H. Cost of Space-Non-Residential 0 0 I. Room & Board-Residential Treatment 0 0 J. Service Payments K. Other 11,250 108,719 119,969 L. **Indirect Costs** 10,000 83,967 96,967 M. **Totals** 79,813 283,386 363,199 Part III - APPROVAL SIGNATURE ORIGINAL SIGNATURE - BLUE INK Signed: Date:\_

**Contractor / Authorized Official** 

## Purchase Contract Budget Supporting Budget Schedules

A. Salary - Contractor Staff only (excluding Recipient Transportation Salaries)									
	alary - Contractor Staff only (exclu				portation Sa	laries)			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	
Number		Pay	%	No.	Annual	Match	<b>Federal</b>	<b>Total</b>	
of	Position or Title	Grade	FTE	Mos. Emp'd	Salary		State	Cost	
Persons				_					
1	Program Director - Academic		50	9	65,000 ( <b>9</b> )		32,500	32,500	
	- <mark>Summer</mark>		.25	3	21,667 (3)	5,417		5,417	
2	Social Workers		.50	12	30,500	15,250	15,250	30,500	
							·		
1	Social Worker		.75	10	46,000	28,750		28,750	
-	Boolar Worker		.,5	10	10,000	20,750		20,730	
1	A		50	10	10.650		0.225	0.225	
1	Administrative Assistant		.50	12	18,650		9,325	9,325	
1	Secretary								
	\$10 per hr X 20 hr/wk X 28 wks						5,000	5,000	
	_								
	г и	2.5							
		ne FTE	2.5						
		ne FTE	0.24						
Attach a cop	y of job description for each position listed ab	ove.	Tot	al – Sal	laries (A.)	49,417	62,075	111,492	

B. Fringe Benefits for C	B. Fringe Benefits for Contractor Staff listed in A (excluding Recipient Transportation Fringe Benefits)							
(1) Type (Itemize)	(2) Method of Computation (Itemize)	(3) Match	(4) Federal State	(5) Total Cost				
FICA - Full-time FICA - Part-time  Health Ins Full-time	7.65 X 106,492 7.65 X 5,000 \$1,500/yr X 2.5	4,888 383 1,750	3,259 2,000	8,147 383 3,750				
	<b>Total</b> - Fringe Benefits (B.)	7,021	5,259	12,280				

## **C.** Staff Development for Contractor Staff only

Do not list registrations fees and related travel cost. List only tuition cost.   Total Staff Development (C.)   0		(1) Item						2) atch	(3) Federal State	(4) Total Cost
Total Staff Development (C)	1 Socia	l Worker Semester Tuition						0	4,365	4,365
No. of No. of Persons   Position or Title   No. of Persons   Position or Title   No. of Persons   No. of Mile   No. of	Do not li	ist registrations fees and related travel cost. Li	ist only tuit	ion cost.						
(1)   (2)   (3)   (4)   Daily Subsistence   (7)   (8)   (9)		T	<b>otal</b> Staff	Developn	nent (C.)			0	4,365	4,365
No. of Persons   Position or Title   No. of Mile   Rate   Position or Title   No. of Mile   Rate   Days   No. of Mile   Rate   Days   No. of Mile   Rate   Days   No. of Mile   No. of Units   No. of Units   Item   No. of Mile   No. of Units   No. of Units   Item   No. of Mile   No. of Units   No. of Units   Item   No. of Mile   No. of No. of Units   No. of Units   Item   No. of Mile   No. of Units   No. of Item   No. of No. of Units   No. of Units   Item   No. of Item	D.	Travel - Contractor Staff only								
Persons   Position or Title   Miles   Mile   Rate   Days   State   Cost		(2)	` '	` ,	Daily Sub	siste	nce		1 1	
Airfare 3,000 Out of St Subsis 8x\$93 0 3744 3744  3 Social Workers 5,000 .345 81 20 0 10,035 10,035  Total - Travel (D.) 0 15,001 15,001  E. Equipment Purchases-Tangible Property  (1) No. of Units Item (2) (3) (4) (5) Federal State Cost  1 Computer 6,125 2,125 4,000 6,125		Position or Title			` '	,		Mato		
Airfare 3,000 Out of St Subsis 8x\$93 0 3744 3744  3 Social Workers 5,000 .345 81 20 0 10,035 10,035  Total - Travel (D.) 0 15,001 15,001  E. Equipment Purchases-Tangible Property  (1) No. of Units Item (2) (3) (4) (5) Federal State Cost  1 Computer 6,125 2,125 4,000 6,125										
Airfare 3,000 Out of St Subsis 8x\$93 0 3744 3744  3 Social Workers 5,000 .345 81 20 0 10,035 10,035  Total - Travel (D.) 0 15,001 15,001  E. Equipment Purchases-Tangible Property  (1) No. of Units Item (2) (3) (4) (5) Federal State Cost  1 Computer 6,125 2,125 4,000 6,125	1	Dua cuam Dinacton	1665	245	01	<b>.</b>	0		0 1222	1222
3 Social Workers 5,000 .345 81 20 0 10,035 10,035  Total - Travel (D.) 0 15,001 15,001  E. Equipment Purchases-Tangible Property  (1) (2) (3) (3) (4) (5) Federal State  Unit	1	· ·								
Total - Travel (D.)   15,001   15,001		Tilluc	3,000	Out of St	540515	OA	<b>473</b>		3711	3711
Total - Travel (D.)   15,001   15,001	2	Social Workers	5,000	245	01	2	10		0 10.025	10.025
E. Equipment Purchases-Tangible Property  (1) (2) (3) (4) (5) (6) (6) (7) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	3	Social Workers	3,000	.343	01		.U		0 10,033	10,033
E. Equipment Purchases-Tangible Property  (1) (2) (3) (4) (5) (6) (6) (7) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1										
E. Equipment Purchases-Tangible Property  (1) (2) (3) (4) (5) (6) (6) (7) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1										
E. Equipment Purchases-Tangible Property  (1) (2) (3) (4) (5) (6) (6) (7) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1										
E. Equipment Purchases-Tangible Property  (1) (2) (3) (4) (5) (6) (6) (7) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1										
E. Equipment Purchases-Tangible Property  (1) (2) (3) (4) (5) (6) (6) (7) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1										
E. Equipment Purchases-Tangible Property  (1) (2) (3) (4) (5) (6) (6) (7) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1										
Computer   Computer   Contact   Co				Total -	Travel (I	).)			0 15,001	15,001
No. of Units Item  Cost per Unit State  Total Cost  1 Computer  6,125  2,125  4,000  6,125  Do not list items with unit cost less than \$500	E.	<b>Equipment Purchases-Tangible Prop</b>	erty							
Units     Item     Unit     State     Cost       1     Computer     6,125     2,125     4,000     6,125       Do not list items with unit cost less than \$500     Item     Item     Item     Item     Item										
Do not list items with unit cost less than \$500										
	1	Computer			6,12	25	2	,125	4,000	6,125
								105	4,000	6,125

F. Transportation - Recipient										
(1	)			(2		··		(3) Match	(4) Federal State	(5) Total
Ite	m		Metne	oa oi C	omputa	tion			State	Cost
1a. Co	ontractor	Recipient Tra	nsportatio	on Staf	f Salari	es				
# of		•	•	Pay	% of	# of Mos.	Annual		<u> </u>	
Persons	]	Position or Title		Grade	Time	Employed	Salary			
1b. Co	ntractor	Recipient Tra	nsnortatio	on Staf	f Fring	- Renefits				
10.	Туре		isportuti			omputation				
	• •					•				
				Total 7	Transpo	rtation - Rec	ipient (F.)			
					Г					
0										
G. M	G. Medical Supplies and Expenses									

	(1) Item	(2) Match	(3) Federal State	(4) Total Cost		
	<b>Total</b> - Medical Supplies and Expense (G.)					
II Contaggion Non	D! J 4! - 1 C - k - J - 1					
H. Cost of Space - Non-	Residential Schedule (2)	(3)	(4)	(5)		
Item	Method of Computation	Match	Federal State	Total Cost		
	of current lease if cost are included for rent. e prorated per # of staff included in application.)  Total Cost of Space - Non - Residential (H.)					
I. Room and Board Co	osts - Residential Treatment					
(1) Item	(2) Method of Computation	(3) Match	(4) Federal State	(5) Total Cost		
TD-4.1	Doom and Doord Costs Desidential Treatment (II)					
J. Service Payment	Room and Board Costs - Residential Treatment (I.)					
J. Service Payment						

(1)	(2)	(3)	(4)	(5)	(6)				
No. of			Match	Federal	Total				
Units	Item	Cost per Unit		State	Cost				
	Total - Services Payment (J.)								

**K. Other Expense** (Each Item listed is an Individual Object to be listed on the DSS-1571S, III)

(1)	(2)	(3)	(4)
Item	Match	Federal State	Total Cost
Ton		State	Cost
Supplies (Itemize in Budget Narrative)	0	32,150	32,150
Printing (Describe in Budget Narrative)	0	16,129	16,129
XXXXXXX	0	5,000	5,000
XXXXXXX	0	8,250	8,250
Subcontracts			
Thorpe, Inc.	0	32,000	32,000
Triangle, Inc.	0	15,190	15,190
In-Kind Agreement			
McAdams University (Letter documenting match)	11,250		11,250
<b>Total</b> - Other Expenses (K.)	11,250	95,469	106,710

L. Indirect Cost\*

(1) Rate	(2) Rate Applied to: (list applicable line item titles)	(3) Amount Rate Applied to:	(4) Match (Unrecovered)	(5) Federal State	(6) Total Cost
44.5% 44.5%	Salary, Fringe, Travel, Supplies Subcontracts (first \$25k)  Deduction of Excess Contractor Funds	190,334 40,190	10,860	78,839 17,885 (34,711)	84,699 17,885 (34,711)
	Total - I	Indirect Cost (L.)	10,860	62,013	72,873

\*Attach a copy of current approved indirect cost rate plan.

	Part IV - Distribution of Estimated Revenue for Total Cost Reimbursement Method								
A. B.	Estimated Eligib  1. Estimated  2. Estimated  3. Total Clie  Eligible Costs		(b) atio						
	(1) Matchable Costs [Part IV, Line M, col. (3)]	(2) Less Program Income	(3) Net Matchable Costs [B.(1) Less (2)]	(4) Estimated % of Eligibles [A. 1. (b)]	(5) Costs Elig for Finan Participa [B.(3) x	cial tion			
	\$	\$	\$		\$				
	Part	V - Computation	n of Unit Cost or	Individual l	Fixed Rate				
A.	1. Total Ma	tchable Costs		\$					
	2. Less: Ea	arned Income for Un	it Cost Method	\$					
	3. Net Match	nable Costs			\$				
B.		vice Unit Capacity, icipated Utilization			_				
C. D.		outation or Source of Cost or Individual Fi		\$	per				